

July 11, 2012

Requisition # 03410-107-12

Disassemble Health Care from ACCESS Analysis

1. Questions during bidders conference, held July 10, 2012

Bidder's Tele-conference for Disassembling Health Care from ACCESS Analysis RFP

Attendance:

Jeff Ruth and Clare Ellis - Redmane

Pat Aguilar – Maximus

Michael McDunna – Public Consulting Group

Kate Jones and Sawyer Joecks – State of VT Contract Administrator and Financial Manager

Stewart Venzke – First Data Government Solutions

Lauren McTear and Scott Melen – State of VT Systems Analyst & Developer

Cheryl Burcham – State of VT Project Manager
Documentation Strategies

Q. Chapter 2 section 2 in the second paragraph (Page 26 of 40) – Can you elaborate as to what the State means by 'known' entities or individuals? What does VT seek to communicate to vendors with that paragraph?

Sentence reads – *These people need to already have some engagement with the State in this effort thus they're 'known' partners.*

A. This is language that was added in during the review process. We will have to find out who wanted to add that language into the RFP and why.

Q. After reading the RFP and responses to the questions, would it be as efficient to put these questions in writing and submit them to the State?

A. Yes, it would be very helpful. Joe, do you want to put a time limit on that?

To keep things to task, they would need to be submitted to the State within the day.

Q. Are all the business rules for the health care functionality, as well as the other modules, documented and stored in an accessible repository? Do you anticipate that the consultant engaged under this procurement would have to extract those business rules from existing code?

A. Some, but not all, business rules are documented that are coded in ACCESS. It would be helpful if we did have that documentation. Because we don't know what the future "looks like", we don't know if some health care programs are going to be eliminated or if they are going to remain, that's to be decided by the legislatures. I'm not sure if that is considered part of this particular project or not, considering the tight deadline that we have.

Q. Does AHS envision that the ACCESS system will remain the eligibility system for human services programs for the foreseeable future or do you envision an eventual replacement or migration to the VIEWS platform?

A. There is a long-term plan that ACCESS will be replaced completely.

Q. Several of the requirements for financial disclosures etc. are really aimed at community based organizations or non-profits rather than for-profit firms but I'm not sure, for example, how companies with large revenue discloses its summary of funds.

A. We usually see a financial statement from for-profit companies. The financial statement is not available under the public records law so that would be considered proprietary.

Q. Is there guidance on how to handle indirect cost limits?

A. We typically set a cap at 13% indirect cost, but we have seen a fluctuation and that can be evaluated further during negotiations between the state and the selected vendor.

Q. Question number 4 – there wasn't an answer to that on the posting.

The question reads – *The section states that the work to be performed as a result of this RFP is estimated to be 3 months. If the vendors do not feel this is duration is long enough to perform the scope of work are they free to propose a schedule that aligns with their proposal?*

A. We are trying to have the work completed in 3 months or less; however, if the vendor does want to submit a proposal that aligns with the scope of work that they feel is feasible, we can certainly review it. There will be negotiation at the time of contract since some of the work is being done at this point. We will have to look at what's been done, what still needs to be done and work from what is known.

Q. There is a defined scope of work in this RFP, I think I heard you just say that perhaps by the time this contract is awarded and signed that VT may have made progress on some of that scope of work already.

A. Yes.

Q. So that will all be taken into account when the state and the selected vendor sit down and figure things out.

A. That's correct.

Q. Is the work being done by an existing vendor or by state staff? If being done by an existing vendor, is that vendor eligible to bid on this procurement?

A. The work currently being done is in-house by state staff.

2. Questions as a follow-up to the bidder's conference:

Chapter 2, Section 2, Second Paragraph, Third and Fourth Sentences – Quote:
“The vendor needs to ensure that for the core lead roles as identified below, there's an ‘understudy’ to continue forward progress with minimal disruption. These people need to already have some engagement with the State in this effort thus they're ‘known’ partners.”

Q: Can you please clarify what your intentions are for including the term “known partners”. Are you requiring partners to partner with an individual or organization that is or has recently been engaged with AHS? Also, can you more clearly define the role of the ‘understudy’?

A: This item is addressing the contractor's staffing proposal. They need to identify key personal but in particular, the core leads. In addition to the core leads, the vendor must identify an ‘understudy’ - someone who could take over for the core lead should there be a need to make a change to personnel.

Q: Are all the business rules for the health care functionality as well as all the other modules documented and stored in an accessible repository or will the consultant extract the business rules from existing code?

A: Some, but not all, business rules are documented and will be accessible to the select vendor. The extraction of the business rules that aren't documented may be out of scope for this project since the State isn't sure if the current health care programs will be available to the public when HIX/VIEWS “goes live”. The legislatures are the ones to decide, and they begin their sessions in January 2013.

Q: Does AHS envision that the ACCESS system will remain the eligibility system for human services programs for the foreseeable future, or do you envision eventual replacement or migration to the VIEWS platform?

A: There is a plan in place to completely replace ACCESS as the eligibility system for human services programs.

Q: Has AHS performed any risk assessments relating to the de-integration of the ACCESS system, and if so could the results of those assessments be made available to potential bidders?

A: As of this time, the State has not performed any risk assessments relating to the de-integration of the ACCESS system

Q: How does AHS envision the overall workflow of cases and data between the HIX, VIEWS, and ACCESS when the ACA goes into effect on January 1, 2014?

A: Some of this is currently being decided and of course parts of it could be decided after the analysis of this work is completed.

Q: Is there a "production like" test environment that the consultants will have access too?

A: Consultants will have access to a mock production environment.

Q: Can the State clarify the requirements for the Summary of Fund worksheet found on Page 39 of 40 of the RFP? It was stated during the bidder's call that audited financial statements would meet the requirement for this form is that correct? If audited financials are adequate, how many years are required?

A: We will require 3 years of audited financial statements.

Good morning,

We had our bidder's conference call yesterday morning and there were a couple of questions that were presented to the State. Can someone help me respond to the questions below?

Q: Has AHS performed any risk assessments relating to the de-integration of the ACCESS system, and if so could the results of those assessments be made available to potential bidders?

No, we have not.

Q: How does AHS envision the overall workflow of cases and data between the HIX, VIEWS, and ACCESS when the ACA goes into effect on January 1, 2014?

We are in the process of defining this right now. At the very least, we will need to share information between the systems to keep ACCESS whole. We are requesting the assistance through this RFP to help define the risk (see number four), and the workflows necessary for production on January 1, 2014.